

## Fee Calculation

CLAIMS AS FILED					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEES
Basic Application Fee					\$710.00
Total Claims	9	Minus 20=	0	X \$18 =	\$0.00
Independent Claims	1	Minus 3=	0	X \$80 =	\$0.00
If multiple dependent claims are presented, add \$260.00					\$0.00
<b>TOTAL APPLICATION FEE DUE</b>					<b>\$710.00</b>

## PAYMENT OF FEES

1. The full fee due in connection with this communication is provided as follows:

- The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085. A duplicate copy of this authorization is enclosed.
- A check in the amount of \$710.00

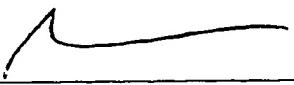
- Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

**WAGNER, MURABITO & HAO LLP**  
Two North Market Street, Third Floor  
San Jose, California 95113  
(408) 938-9060

Respectfully submitted,

Date: 7/12/01

By:   
John P. Wagner, Jr.  
Reg. No. 35,398